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P A T E N T & T R A D E M A R K O F F I C E

FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

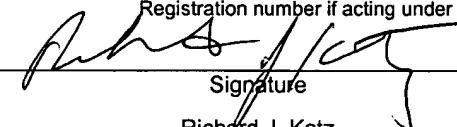
TOTAL AMOUNT OF PAYMENT	(\$) 110.00
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TOTAL AMOUNT OF PAYMENT	(\$) 110.00	Attorney Docket No.	01098/000F805-US0
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METHOD OF PAYMENT (check all that apply)			FEES CALCULATION (continued)																																																																																																																
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Deposit Account <input type="checkbox"/> None Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C.			2. EXTRA CLAIM FEES <table border="1"> <thead> <tr> <th><u>Fee Description</u></th> <th><u>Fee (\$)</u></th> <th><u>Small Entity Fee (\$)</u></th> </tr> </thead> <tbody> <tr> <td>Each claim over 20</td> <td>18</td> <td>9</td> </tr> <tr> <td>Each independent claim over 3</td> <td>88</td> <td>44</td> </tr> <tr> <td>Multiple dependent claims</td> <td>300</td> <td>150</td> </tr> <tr> <td>For Reissues, each claim over 20 and more than in the original patent</td> <td>18</td> <td>9</td> </tr> <tr> <td>For Reissues, each independent claim more than in the original patent</td> <td>88</td> <td>44</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th><u>Total Claims</u></th> <th><u>Extra Claims</u></th> <th><u>Fee (\$)</u></th> <th><u>Fee Paid (\$)</u></th> </tr> </thead> <tbody> <tr> <td>3 - 20 or HP =</td> <td>x</td> <td>=</td> <td>0.00</td> </tr> <tr> <td colspan="4">HP= highest number of total claims paid for, if greater than 20</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th><u>Indep. Claims</u></th> <th><u>Extra Claims</u></th> <th><u>Fee (\$)</u></th> <th><u>Fee Paid (\$)</u></th> </tr> </thead> <tbody> <tr> <td>1 - 3 or HP =</td> <td>x</td> <td>=</td> <td>0.00</td> </tr> <tr> <td colspan="4">HP= highest number of independent claims paid for, if greater than 3</td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th colspan="2">Multiple Dependent Claims</th> <th><u>Fee (\$)</u></th> <th><u>Fee Paid (\$)</u></th> </tr> </thead> <tbody> <tr> <td colspan="2"></td> <td align="right">Subtotal (2) \$ 0.00</td> <td></td> </tr> </tbody> </table> <table border="1"> <thead> <tr> <th colspan="3">3. OTHER FEES</th> <th><u>Small Entity</u></th> </tr> <tr> <th><u>Fee Description</u></th> <th><u>Fee (\$)</u></th> <th><u>Fee (\$)</u></th> <th><u>Fee Paid</u></th> </tr> </thead> <tbody> <tr> <td>1-month extension of time</td> <td>110</td> <td>55</td> <td>110.00</td> </tr> <tr> <td>2-month extension of time</td> <td>430</td> <td>215</td> <td></td> </tr> <tr> <td>3-month extension of time</td> <td>980</td> <td>490</td> <td></td> </tr> <tr> <td>4-month extension of time</td> <td>1,530</td> <td>765</td> <td></td> </tr> <tr> <td>5-month extension of time</td> <td>2,080</td> <td>1,040</td> <td></td> </tr> <tr> <td>Information disclosure stat. Fee</td> <td>180</td> <td>180</td> <td></td> </tr> <tr> <td>37 CFR 1.17(q) processing fee</td> <td>50</td> <td>50</td> <td></td> </tr> <tr> <td>Non-English specification</td> <td>130</td> <td>130</td> <td></td> </tr> <tr> <td>Notice of Appeal</td> <td>340</td> <td>170</td> <td></td> </tr> <tr> <td>Filing a brief in support of appeal</td> <td>340</td> <td>170</td> <td></td> </tr> <tr> <td>Request for oral hearing</td> <td>300</td> <td>150</td> <td></td> </tr> <tr> <td>Other:</td> <td></td> <td></td> <td></td> </tr> <tr> <td colspan="3"></td> <td align="right">Subtotal (3) \$ 110.00</td> </tr> </tbody> </table>			<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Small Entity Fee (\$)</u>	Each claim over 20	18	9	Each independent claim over 3	88	44	Multiple dependent claims	300	150	For Reissues, each claim over 20 and more than in the original patent	18	9	For Reissues, each independent claim more than in the original patent	88	44	<u>Total Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	3 - 20 or HP =	x	=	0.00	HP= highest number of total claims paid for, if greater than 20				<u>Indep. Claims</u>	<u>Extra Claims</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>	1 - 3 or HP =	x	=	0.00	HP= highest number of independent claims paid for, if greater than 3				Multiple Dependent Claims		<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>			Subtotal (2) \$ 0.00		3. OTHER FEES			<u>Small Entity</u>	<u>Fee Description</u>	<u>Fee (\$)</u>	<u>Fee (\$)</u>	<u>Fee Paid</u>	1-month extension of time	110	55	110.00	2-month extension of time	430	215		3-month extension of time	980	490		4-month extension of time	1,530	765		5-month extension of time	2,080	1,040		Information disclosure stat. Fee	180	180		37 CFR 1.17(q) processing fee	50	50		Non-English specification	130	130		Notice of Appeal	340	170		Filing a brief in support of appeal	340	170		Request for oral hearing	300	150		Other:							Subtotal (3) \$ 110.00
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Signature			Registration No. (Attorney/Agent)	47,698	Telephone																																																																																																														
Name (Print/Type)	Richard J. Katz		Date	December 1, 2004																																																																																																															



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2005 (fees effective on or after October 1, 2004)		Docket Number (Optional) 01098/000F805-US0																		
Application Number	09/460,891	Filed December 14, 1999																		
For METHOD AND APPARATUS FOR COMPENSATING FOR AN ECHO SIGNAL COMPONENT IN TELECOMMUNICATION SYSTEMS																				
Art Unit	2644	Examiner C. P. Tran																		
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):</p> <table> <thead> <tr> <th></th> <th>Fee</th> <th>Small Entity Fee</th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td>\$110.00</td> <td>\$55.00</td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td>\$430.00</td> <td>\$215.00</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td>\$980.00</td> <td>\$490.00</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td>\$1,530.00</td> <td>\$765.00</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td>\$2,080.00</td> <td>\$1,040.00</td> </tr> </tbody> </table> <p><input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.</p> <p><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.</p> <p><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>04-0100</u>. I have enclosed a duplicate copy of this sheet.</p>				Fee	Small Entity Fee	<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$110.00	\$55.00	<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$430.00	\$215.00	<input type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$980.00	\$490.00	<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1,530.00	\$765.00	<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2,080.00	\$1,040.00
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<p>I am the <input type="checkbox"/> applicant/inventor.</p> <p><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).</p> <p><input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>47,698</u></p> <p><input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____</p> <p> Signature</p> <p><u>Richard J. Katz</u> Typed or printed name</p> <p>December 1, 2004 Date</p> <p>(212) 527-7700 Telephone Number</p>																				
<p>NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.</p> <p><input type="checkbox"/> Total of <u>1</u> forms are submitted.</p>																				

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